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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/566,021 1			ing Date 20/2007	To be Mailed	
APPLICATION AS FILED — PART I (Column 1) (Column 2)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
FOR NUMBER FILED NUMBER						BER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i), (or (m))	N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =		*			X \$ =		OR	X \$ =		
IND	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 =		*			X \$ =		1	X \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	shee is \$2 addit	If the specification and di sheets of paper, the appl is \$250 (\$125 for small e additional 50 sheets or fr 35 U.S.C. 41(a)(1)(G) an			plication size fee due entity) for each fraction thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))													
* If the difference in column 1 is less than zero, enter "0" in column 2.											TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENT													
AMENDMENT	06/07/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 11	Minus	** 20		= 0		X \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	* 3	Minus	***3		= 0		X \$ =		OR	X \$220=	0	
AM	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)													
ENDMENT	06/08/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBEF PREVIOUS PAID FOR	R SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 11	Minus	** 20		= 0		X \$ =		OR	X \$52 =	0	
	Independent (37 CFR 1.16(h))	* 3	Minus	*** 3		= 0		X \$ =		OR	X \$220 =	0	
ÎĒN	Application Size Fee (37 CFR 1.16(s))												
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: /KAREN VESTAL/ *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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